

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>		12/27/94
O.I.P.E. CLASSIFIER		48	11/10/00
FORMALITY REVIEW	CM	71632	1/13/00
RESPONSE FORMALITY REVIEW	CM	71632	3/2/00

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Date
1	9/1/94
2	9/24/94
3	9/28/94
4	9/28/94
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If more than 150 claims or 10 actions
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